

Pursuant to the Federal Privacy Act (Public Law 93-579) and the Information Practices Act (IPA) of 1977 (Civil Code Sections 1798, *et seq.*), notice is hereby given for the request of personal information. Failure to provide all or any part of the requested information may delay processing of this form, or result in an incomplete record. No disclosure of personal information will be made unless permissible under Article 6, Section 1798.24 of the IPA of 1977. Each individual for whom personal information is collected has the right to inspect that information in any record maintained by POST. Inquiries may be directed to the POST Information Practices Act Coordinator at the address listed above. Contact the POST Information Services Bureau for instructions on requesting records.

INSTRUCTIONS

- POST Regulation 1005 (e) authorizes submission of this completed and signed application to request a waiver of the Management Course prerequisite for attending the Executive Development Course.
- This form may be filled in on line or you can print this document and type or legibly print (in ink) all required information
- Mail your **printed and signed copy** of the completed application form **with your payment** to POST at the above address.

Section 1: Applicant Information

1. NAME (LAST) (FIRST) (MIDDLE)			2. BIRTH DATE
3. NAME OF EMPLOYING AGENCY		4. RANK	5. SOCIAL SECURITY NUMBER
6. AGENCY MAILING ADDRESS (STREET / P.O. BOX)			
5. CITY	6. STATE	7. ZIP	8. DAYTIME PHONE NUMBER ()

Section 2: Evaluation Eligibility

9. I AM ELIGIBLE TO HAVE MY PRIOR EXPERIENCE, TRAINING, EDUCATION, AND CURRENT EXECUTIVE RESPONSIBILITIES EVALUATED TO DETERMINE MY ELIGIBILITY FOR A WAIVER OF THE MANAGEMENT COURSE PREREQUISITE FOR ATTENDING THE EXECUTIVE DEVELOPMENT COURSE BECAUSE I MEET BOTH OF THE FOLLOWING CONDITIONS:

YES ☐ NO ☐ I am currently a full-time sworn California peace officer.

YES ☐ NO ☐ I am currently the chief executive of the same POST-program agency.

10. I HAVE ENCLOSED THE FOLLOWING REQUIRED ITEMS:

- ☐ Written verification, on agency letterhead and signed by the employer or a designated representative, that confirms that my past experience in successfully conducting a full range of chief executive responsibilities, performing high level managerial and administrative duties consistent with the position held.
- ☐ Written documentation supporting my prior experience, training, education and current executive responsibilities, consistent with the 13 major topics listed in the Management Course Instructional Goals.
- ☐ Verification of prior successful completion of training, supported by copies of certificates of completion, course outlines, college transcripts and/or other verifying documents.

Section 3: Agency Executive Attestation and Signature

- I request an evaluation of my prior experience and training to determine if I am qualified for a waiver of attendance of the POST Management Course for purposes of attending the Executive Development Course.
- I understand that a waiver would only exempt me from completing the Management Course as a prerequisite for attending the Executive Development Course. The waiver does not exempt me from any POST certificate requirements.
- I further declare under penalty of law that the information contained in this application and supporting documents is true and correct.

11. Applicant Signature _____

12. Date _____

POST USE ONLY

[illegible]